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To Fax no.: 1.703.872.9306

Page 1 of: 9

Attention: USPTO

From: Ronald D. Faggetter / Colin C. Climie

Your file no.: Patent Serial No. 09/617,232

Reply to Toronto file no.: 91436-255

438 University Avenue
Suite 1500, Box 111
Toronto, Canada M5G 2K8

Tel.: (416) 593-5514
Fax: (416) 591-1690

Date: July 19, 2004

Time:

The following documents are enclosed:

1. Transmittal Letter.
2. Response to Office Action dated July 19, 2004.

If there are any transmission problems, please call (416) 593-5514.

Original copy and any enclosures

☐ will be sent by ☐ mail
☒ will not be sent by ☐ courier

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of:
Tadeusz J. Drwiega et al.

Group Art Unit 2261

Examiner: Van Kim T. Nguyen

Serial No.: 09/617,232

Attorney Docket No.: 91436-255

Filed: 7/14/2000

For: AUTOMATED AND ADAPTIVE
MANAGEMENT OF BANDWIDTH
TELECOMMUNICATIONS NETWORKS

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450
USA

Certificate of Transmission

I hereby certify that this correspondence is being
facsimile transmitted to the Patent and
Trademark Office Fax No. (703) 872-9306
on July 19, 2004.

Signature

Ronald D. Faggetter

TRANSMITTAL LETTER (Large Entity)

Dear Sir:

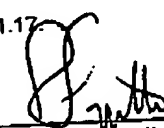
Transmitted herewith is a response in the above-identified application.
The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	11	19	0	X \$18.00	\$0
INDEP. CLAIMS	3	7	0	X \$86.00	\$0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0

- ☒ No additional fee is required for amendment
- ☐ Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this sheet is enclosed.
- ☒ Conditional Petition for Extension of Time: An extension of time is requested to provide for timely filing if an extension of time is still required after all papers filed with this transmittal have been considered. Please charge the fees required therefor to Deposit Account No. 19-2548.
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-2548. A duplicate copy of this sheet is enclosed.
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☒ Any patent application prosecution fees under 37 C.F.R. 1.17.

July 19, 2004

Date
91436-255
Encl.
Telephone: (416) 593-6514


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